## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

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| CLAIMS AS FILED - PART I  |  |   |                                      |                               | (Oak mar 0)                     |                                  |            | SMALL ENTITY              |                        | OTHER THAN<br>OR SMALL ENTITY |                     | <b>1</b>               |
|---|--|---|--------------------------------------|-------------------------------|---------------------------------|----------------------------------|------------|---------------------------|------------------------|-------------------------------|---------------------|------------------------|
| TOTAL OLABAS  |  |   | (Column 1)                           |                               | (Column 2)                      |                                  |            | TYPE                      |                        | OR                            |                     |                        |
| TOTAL CLAIMS  |  |   | . 15                                 |                               |                                 |                                  |            | RATE                      | FEE                    |                               | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILEO                         |                               | NUMBER EXTRA                    |                                  |            | BASIC FEE                 | 375.00                 | OR                            | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 5 minus 20=                          |                               | . 0                             |                                  |            | X\$ 9=                    |                        | OR                            | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =                            |                               | • Ø                             |                                  |            | X42=                      |                        | OR                            | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESEN   |  |   |                                      | ENT                           |                                 |                                  |            | +140=                     |                        | OR                            | +280=               |                        |
| * If the difference in column 1 is less than zero, e  |  |   |                                      |                               | r "O" in c                      | olumn 2                          |            | TOTAL                     | 375                    | OR                            | TOTAL               |                        |
| 5-4-05 CLAIMS AS AMENDED - PART II  |  |   |                                      |                               |                                 |                                  |            | . 1                       |                        | •                             | OTHER               | THAN                   |
| )   |  | (Column 1)                                |                                      | (Colu                         |                                 |                                  |            | SMALL E                   | NTITY                  | OR                            | SMALL               | NTITY                  |
| NTA   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                    | PRESENT<br>EXTRA                 |            | RATE                      | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT A   | Total  | . 24                                      | Minus                                | ** 0                          | 20                              | = 4                              |            | 25<br>X <del>\$ 9</del> = | 100.                   | OR                            | X\$18=              |                        |
|   | Independent  | • 4                                       | Minus                                | *** (                         | 3                               | = /                              |            | <del>X42=</del>           | 100.                   | OR                            | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                      |                               |                                 |                                  | J          | /80<br>+ <del>140=</del>  | ·                      | OR                            | +280=               |                        |
|   |  |   |                                      |                               |                                 |                                  |            | TOTAL                     | 200.                   | OR                            | TOTAL<br>ADDIT, FEE |                        |
|   | •  | (Column 4)                                |                                      | /Colu                         | mn 2)                           | (Column 3                        | `          | ADDIT. FEE                |                        | 1                             | ADDIT. FEE          |                        |
| AMENDMENT B   |  | (Column 1)<br>CLAIMS                      | ;                                    | HIGH                          | HEST                            |                                  | ጎ          |                           | ADDI-                  |                               |                     | ADDI-                  |
|   |  | REMAINING<br>AFTER<br>AMENDMENT           |                                      | PREVI                         | MBER<br>OUSLY<br>FOR            | PRESENT<br>EXTRA                 |            | RATE                      | TIONAL<br>FEE          |                               | RATE                | TIONAL<br>FEE          |
|   | Total  | *   | Minus                                | **                            |                                 | =                                | ]          | X\$ 9=                    |                        | OR                            | X\$18=              |                        |
|   | Independent  | *   | Minus                                | ***                           | <del></del>                     | -                                | _          | X42=                      |                        | OR                            | X84=                |                        |
|   | FIRST PRESE  | ULTIPLE DEF                               | ENDEN                                | CLAIM                         |                                 | ┛.                               | +140=      |                           |                        | +280=                         | ·                   |                        |
|   |  |   |                                      |                               |                                 |                                  |            | TOTAL                     |                        | OR                            | TOTAL               |                        |
|   |  |   |                                      |                               |                                 |                                  | ADDIT. FEE |                           | JOR                    | ADDIT. FEE                    |                     |                        |
|   |  | 3)  | . "                                  | <u> </u>                      | _                               |                                  |            |                           |                        |                               |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                      | NUM<br>PREV                   | HEST<br>MBER<br>MOUSLY<br>D FOR | PRESENT<br>EXTRA                 |            | RATE                      | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |
| NO.   | Total  | *   | Minus                                | **                            |                                 | 3.                               |            | X\$ 9=                    |                        | OR                            | X\$18=              | .,                     |
| NE NE   | Independent  | *   | Minus                                | ***                           | ·                               | =                                | _          | X42=                      |                        | OR                            | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA   |   |                                      |                               |                                 |                                  |            | -                         |                        | 10"                           |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |                                      |                               |                                 |                                  |            | +140=                     |                        | OR                            | 1                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                                      |                               |                                 |                                  |            |                           |                        | OR                            | TOTAL<br>ADDIT, FEE |                        |
| :   | "If the "Highest Nu<br>The "Highest Nur  | umber Previously I<br>mber Previously P   | Paid For" IN TH<br>aid For" (Total o | r Indepen                     | is less the<br>ident) is th     | an 3, enter "3.<br>e highest num | ber k      | ound in the ap            | propriate bo           | ox in c                       | olumn 1.            |                        |
| پيا   | The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  FORM PTO 975 (Rev. 12/02) *** **U.S. Government Patrice Office: 2008 — 498-278/09151 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE |   |                                      |                               |                                 |                                  |            |                           |                        |                               |                     |                        |